## Maine Department of Transportation Highway Opening Application

Date:

**Applicant Information:** 

Name:			Phone:	Pager/Cell:							
Address:		Town:		ate: ZIF	<b>:</b>						
Primary Contact Information: (Write "SAME" if the primary contact for on-site work will be the Applicant)											
Name:			Phone:	Pager/Cell:							
		Town:	Sta	_	).						
Address:		Town:		ite. Zir	•						
Proposed Work Informa	ation:		Highway Number (if known):								
Town:			Road Name:								
Type of Work Propose	d:			*Please attacl	*Please attach a sketch plan*						
Who will perform worl	<i>ς</i> ?:			l							
	Anticipated work schedule: Starting Date: Completion Date:										
•	C		*		NT/A						
If this work is for a utility, h		•		Yes No	N/A						
If this work is state funded,	is it covered by the Sta	ate Agency Addend	um? Yes No	o N/A							
Have all existing utilities in	the work area been no	tified of the propos	ed work and given an oppor	tunity to comment?	Yes	No					
GPS Coordinates of W	ork Location: (Please	e enter coordinate	s in Decimal Degrees, Wo	GS 1984)							
	(		tude (ex: 44.3074199)	Longitude (ex: -	59 7775613)						
	C((		idde (cx. 44.5074177)	Longitude (ex.	37.1773013)						
	Starting										
	Ending	Point:									
Impact & Ess Informati	lone.										
Impact & Fee Information Surface Ty		(A) Unit Costs	(D) Estimated Area	Iven a of	Value (A)w(D)						
Paved Surface: Bituminous C		(A) Unit Cost: \$50.00 per Sq.	(B) Estimated Area		Impact Value (A)x(B)						
surface/shoulders (Min. fee \$50		Yard	Sq. Yard(s)	\$	3						
	Concrete Surface: Portland Cement Concrete or		G V V	, d	\$						
Bituminous on concrete. (Min.	fee \$75, see below)	\$75 per Sq. Yard	Sq. Yard(s)	3							
All Other Surfaces: Plain gra		\$5.00 per Sq. Yard	S5.00 per Sq. Yard Sq. Yard(s)								
or area outside roadbed. (Min. fee \$25, see below)			* ' '		\$						
<b>Direct Buried Cable:</b> (Low-impact installation of		\$0.20 per	Lineal Feet	\$	\$						
cable outside of the traveled way/shoulder)		Lineal Foot			+						
Other Work in addition to replacing pavement (Specify)				\$	\$						
(Specify)		Total Impac	t Value (Sum of all Impact Val	ues)	8						
Permit Fee (10% of Total Imp		,									
	specified above for the surface type impacted, than the highest ap				\$						
(Example: if you impact a paved and a non-paved surface, the appli			imum fee is \$50).		'						
		Instructions	for Payment:								
If you are a licensed utility, a		her governmental en	tity AND the TOTAL IMPACT		ove is \$5,000 or	less,					
please include payment in the a											
If you are NOT a licensed uti											
less, AND you will <u>not</u> be impa											
application. If you ARE propo				ayment in the amount of	the TOTAL IM	PACT					
VALUE and all but 10% will b				entities OR \$2 500 for	all other applica	nte e					
If the TOTAL IMPACT VALUE exceeds \$5,000 for licensed utilities, municipalities or other governmental entities, OR \$2,500 for all other applicants, a SPECIAL OPENING PERMIT as described in section II E of the Rules, Regulations and Policies shall also apply. In this circumstance, an escrow account											
will be established and there is				appij. in ans circumsta	wii W U						
	no direct payment subm	ittea with this addiicai	HOII.		,						
Do you request retuing of the			overlay per Section II, A. of t	the Special Opening Pe							

conditions specified in the Highway Opening Permit; (2) the Department's Highway Opening Rules, Regulations and Policies; (3) the Department's Utility Accommodation Rule (17-229 CMR 210); (4) all conditions of a Utility Location Permit issued pursuant to 17-229 CMR 210; and (5) local ordinances and federal and state laws. In the event of a conflict between any applicable requirements, the more stringent requirement shall govern unless otherwise directed by the Department. Specific attention is directed to the following requirements: (1) Work zone traffic control standards as defined by the Manual on Uniform Traffic Control Devices (MUTCD); (2) Occupational Safety & Health Administration (OSHA) trenching and excavation standards; and (3) 23 MRSA Section 3360-A, Protection of Underground Facilities (a.k.a. "The Dig Safe® Law") which requires notification to various entities at least three working days prior to making any excavation. Additional information may be found at: <a href="http://mutcd.fhwa.dot.gov">http://mutcd.fhwa.dot.gov</a>,

## **Highway Opening Application Sketch Plan**

Applicant Name:			Town:				
The purpose of this "Sketch P is not intended to be drawn to scale, he distances from one of the lines on the	owever, yo	ou must accurate	ely reference the	propo	sed facility and excar	vation with offset	n
	Shldr	Travel Lane	Travel Lane	Shldr			
Right-of-Way Line	Edge of Shoulder	Lane Edge of Travel Way (ETW)	e Edge of Travel Way (ETW)	Edge of Shoulder	Indicate NORTH	Right-of-Way Line	
							_